

MESSAGE CONFIRMATION

DATE:04/27/95 TIME:13:12

ID:RJ REYNOLDS N. JE

DATE	TIME	TX-TIME	DISTANT STATION ID	MODE	PAGES	RESULT
04/27	13:10	02'07"	2167791889	G3-S	004	OK

51849 4151



Tobacco Company

LANNY T. WOLFE #1242
Special Accounts Manager
400 Raritan Center Parkway
Raritan Center
Edison, NJ 08837
908-225-4774 Fax 908-417-9076

Fax Message

DATE:

4/27/95

TO:

JIM PISCITELLI 216-779-1889

SUBJECT:

GLIKIN BROS. - BRANDON

TOTAL PIECES FAXED:
(INCLUDING COVER)

4

JIM,

ATTACHED IS FORECAST FOR GLIKIN BROS. AS WELL
AS POS, TAGS, DISPLAY AND VPR ORDER FORM. THEY
DECIDED TO GO WITH BRANDON. PLEASE LET ME
KNOW IF THERE IS ANY PROBLEM WITH THAT. THEY
DECIDED IT WAS WORTH GIVING UP THE BOX STYLES TO
GO WITH THE NEW PACKAGING. IF YOU NEED
ANYTHING ELSE PLEASE LET ME KNOW.

If you have any questions, please call me.

Lanny

NOTE: PLEASE LET ME KNOW WHAT
THE UPC CODES ARE SO I CAN PROVIDE
THEM TO GLIKIN.

51849 4152

Date

4/27/95

Via Fax To: Mabel Perry 910/741-2156

From:

LANNY WOLFE

Pls add the following products to whse.

Date needed: ASAP.

Account Number

227040

Name

GILKIN BROS.

Location

2 JOSEPH ST., NEWARK, N.J. 07105

Contact Person

JEFFREY MICHELSON

Good Date

Describe Promotion

(Ex: Buy-Down, Premiums, ETC.)

BUY DOWN

How Often Should Volumes Be Available

Monthly

Weekly ☒

Bi-Weekly

1 Time Only

Start Date

Estimated End Date

BRAND	STYLE	UPC	QUANTITY
<u>BRANDON</u>	Lights		<u>1</u>
"	Lights 100		<u>1</u>
"	Menthol Lights		<u>1</u>
"	Menthol Lts. 100		<u>1</u>
"	Full Flavor		<u>1</u>
"	Full Flavor 100		<u>2</u>
"	Ultra Lights		
"	Ultra Lights 100		<u>1</u>
"	Non-Filter		
"	Full Flavor Menthol		<u>1</u>
"	Full Flavor Men. 100		<u>2</u>
"	Full Flavor Box		<u>1 *</u>
"	Light Box		<u>1 *</u>

51849 4153

cc: JMP - via fax - 216/779-1889

extraord.xls

GENERIC POS, PACKAGE TAGS AND DISPLAY ORDER FORM

PRIVATE LABEL BRAND BRANDON

DATE 4/27/95

SHIP TO LOCATION:

SIS#: 227040
 COMPANY: GLIKIN BROS.
 STREET: 2 JOSEPH ST.
 CITY/STATE: NEWARK, NJ 07105
 PO#: _____
 SPECIAL INSTRUCTIONS: _____

MAIL ORDER FORM TO:

R.J. REYNOLDS TOBACCO COMPANY
 SALES MATERIAL OPERATIONS LOGISTICS
 P.O. BOX 2959
 Winston-Salem, NC 27102-2959
 Tel. (910) 741-3328 FAX (910) 767-2321

51221889
 TRACE.

ORDERS WILL BE PROCESSED WITHIN
 48 HOURS UPON RECEIPT

GENERIC POINT OF SALE (25 PER SKU)

	QUANTITY
432636 2 SIDED SMALL PPD CARD	2
394902 LARGE PPD CARD	4
394891 PUMP TOPPER	1
403911 2 SIDED DUMP BIN	
RISER CARD	2
394880 FOLDED SHELF STRIP	10
394858 24" PK MERCH CARD	
468173 19" CANOPY CARD	
394869 CHANNEL STRIP	10
394847 EXTND LG PPD CARD	4

CARTON END LABELS

	QUANTITY
462390 FF85 CTN END LABEL	5
462405 FF83 BX CTN END LABEL	
462411 FF100 CTN END LABEL	5
462441 L85 CTN END LABEL	5
462471 L83 BX CTN END LABEL	
462480 L100 CTN END LABEL	5
462510 UL 85 CTN END LABEL	5
462522 UL100 CTN END LABEL	5
462420 FFM85 CTN END LABEL	5
462432 FFM100 CTN END LABEL	5
462495 LM85 CTN END LABEL	5
462501 LM100 CTN END LABEL	5
462531 NF85 CTN END LABEL	

FORSYTH PACKAGE TAGS (55 TAGS PER SKU)

	QUANTITY (SKU = 1 PAGE)
385464 FILTER 100'S SOFT PACK	10
385475 FILTER 85'S SOFT PACK	10
385486 LIGHT 100'S SOFT PACK	10
385497 LIGHT 85'S SOFT PACK	10
385508 ULTRA LIGHTS 100'S	10
385519 ULTRA LIGHTS 85'S SOFT PACK	
385530 LTS MENT 100'S SOFT PACK	10
385541 LTS MENTR 85'S SOFT PACK	10
385552 MENTHOL 100'S SOFT PACK	10
385563 MENTHOL 85'S SOFT PACK	10
385574 FILTER 83 BOX	
385585 LIGHTS 83 BOX	
385596 NON FILTER 85'S	

FORSYTH PERMANENT DISPLAYS

	QUANTITY
487376 FORSYTH MFD W/TOPPER (5 CTN WIDE, 5 SHELF)	5
364179 PERM. COUNTER DISPLAY (4 TRAY)	100
364366 ADD ON/PERM. COUNTER DISPLAY	50

FORSYTH TEMPORARY DISPLAYS

	QUANTITY
171239 FLOOR DUMP DISPLAY-LARGE	
158149 FLOOR DUMP DISPLAY-SMALL	
458131 DIMENSION 4 CORR. 4-WAY PROMO DISPLAY (100 CTNS OR 360 PACKS)	
417617 TEMPORARY PACKAGE COUNTER DISPLAY (W/OPTIONAL STAIR STEP)	

PL BRAND	LG. PACK STICKER ITEM#* (30 PER PACK)	QUANTITY	SM. PACK STICKER ITEM#* (120 PER PACK)	QUANTITY
BRANDON		10		5

*ITEM #'s MUST BE FURNISHED!

COUPON AND VPR ORDER FORM

FORSYTH TOBACCO

CUSTOMER SERVICE
P.O. BOX 2959
Winston-Salem, NC 27102

ORDER INFORMATION

(PLEASE PRINT)

COMPANY NAME: GLIKIN BROS.
CONTACT NAME: JEFFREY MICHELSON
PURCHASE ORDER# _____
STREET ADDRESS: 2 JOSEPH ST.
CITY: NEWARK
STATE: N.J. ZIP: 07105
PHONE# 201 344-0500
FAX: 201 817-9325
SALES REP: LANNY WOLFE
AUTHORIZED BY: _____ DATE: 4/27/95
SIGNATURE: [Signature]

FORSYTH TOBACCO INTERNAL USE

Tracking Code _____ Date Order Received _____
Forsyth Rep _____

BRAND:

SHIPPING INFORMATION

(PLEASE PRINT)

COMPANY NAME: _____
ATTENTION: _____
STREET ADDRESS: _____
CITY: _____
STATE: _____ ZIP: _____
PHONE# _____
SPECIAL INFO: _____

ORDER INFORMATION

A

ITEM# 440035 DESCRIPTION 2,000 OFF A 17N. VPR LEAD TIME _____
BRAND BROWN QUANTITY 500
PRODUCT ORDER ATTACHED _____ YES ☒ NO ☐
DATE NEEDED _____ DATE PRODUCT NEEDED ASAP
PROMOTION DATES _____ TO _____ ATTACH BANDING TAPE ORDER FORM IF NEEDED
SPECIAL INSTRUCTIONS _____
TOTAL # 500 x FACE VALUE 2.00 + PRODUCTION/HANDLING COST = PROGRAM COST

B

ITEM# _____ DESCRIPTION _____ LEAD TIME _____
BRAND _____ QUANTITY _____
PRODUCT ORDER ATTACHED _____ YES ☐ NO ☐
DATE NEEDED _____ DATE PRODUCT NEEDED _____
PROMOTION DATES _____ TO _____ ATTACH BANDING TAPE ORDER FORM IF NEEDED
SPECIAL INSTRUCTIONS _____
TOTAL # _____ x FACE VALUE _____ + PRODUCTION/HANDLING COST = PROGRAM COST

IMPORTANT

- CANCELLATIONS of orders will not be accepted
- Minimum quantities must be ordered
- Additional charge for special shipping request

\$ 1050 Cost of A
\$ _____ Cost of B
\$ _____ Special Shipping
\$ 1050 Total Cost

51849 4155

MAIL OR FAX TO FORSYTH CUSTOMER SERVICE (910) 741-2156